2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000010657

Entity Name: EQUINOX OIL, INC.

FILED Apr 18, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

C/O RICHARD C. SMITH 201 SOUTH BISCAYNE BLVD SUITE 2400 MIAMI, FL 33131

Current Mailing Address: New Mailing Address:

C/O JANICE L. RUSSELL ONE S.E. 3RD AVENUE, 28TH FLOOR C/O RICHARD C. SMITH 201 SOUTH BISCAYNE BLVD SUITE 2400 MIAMI, FL 33131 MIAMI, FL 33131

FEI Number: 65-1069970 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SMITH, RICHARD C SMITH, RICHARD C 201 SOUTH BISCAYNE BLVD 201 SOUTH BISCAYNE BLVD SUITE 2400 SUITE 2400 MIAMI, FL 33131 MIAMI, FL 33131 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: 04/18/2005

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Delete Title: (X) Change () Addition

SMITH, RICHARD C SMITH, RICHARD C Name: Name:

201 SOUTH BISCAYNE BLVD SUITE 2400 201 SOUTH BISCAYNE BLVD SUITE 2400 Address: Address:

City-St-Zip: MIAMI, FL 33131 City-St-Zip: MIAMI, FL 33131

PD Title: DPS Title: () Delete (X) Change () Addition Name: Name:

ASIBELUA, MOHAMMED ASIBELUA, MOHAMMED

12/14 REEVES MEWS, FLAT II PARK MOUNT LODGE Address: 12/14 REEVES MEWS, FLAT II PARK MOUNT LODGE Address:

LONDON, UK W1Y 3PB LONDON, UK W1Y 3 PB UK City-St-Zip: City-St-Zip:

Title: Title: () Change (X) Addition () Delete DVP

Name: ASIBELUA, FATI Name:

12/14 REEVES MEWS, FLAT II PARK MOUNT LODGE Address Address:

City-St-Zip: City-St-Zip: LONDON, UK W1Y 3 PB UK

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Ρ SIGNATURE: MOHAMMED ASIBELUA 04/18/2005